

APPLICATION FOR LIQUEFIED PETROLEUM GAS (LPG) FACILITY LICENSE

INSTRUCTIONS

The following application consists of this instruction page and one page that requires responses. Please read all questions carefully and complete the entire application by providing all of the requested information. Some questions may require additional documentation and your application cannot be processed until the Bureau receives all required documentation. You are responsible to order documentation that must be received directly from third parties, and to instruct the third party to send the documents directly to the Board office at the address below. If you are unable to provide any of the required documentation, or the documentation is otherwise unobtainable, you must submit a written explanation and any documents in your possession that would assist the Board in reviewing your application. Your signature must be notarized and the appropriate fees must be attached. Be sure to attach any requested supplemental information. Submit the completed form to the address noted below. The Board will consider only properly completed applications. Failure to provide a complete application, supporting documentation, and fees will result in a delay in your license.

FACILITIES

If you are applying for the licensure of an LPG Facility, the business address you list on the application **MUST** be the physical location of the facility. If there is more than one person sharing ownership, you must attach a separate sheet containing the name and address of each principal, member, partner, shareholder, or any other person claiming an ownership interest in the facility for which licensure is being requested.

The following items must be provided to the Board:

- Provide your Federal Tax I.D. number or other proof that you are lawfully entitled to do business in the U.S.;
- The identity and license number of the Idaho licensed dealer responsible for the facility operation;
- Provide the location address of the facility and a description of the type of structure and equipment to be used in the operation of the facility;
- Provide a full diagram of the entire facility drawn to scale and showing all buildings, facilities, equipment and other relevant features;
- Such further information as may be requested by the board to ensure the safe operation of the facility, and its compliance with the requirements of Idaho law and rule;

The person responsible for facility operation must maintain such records documenting the storage, transportation, dispensation and utilization of LPG in accordance with law and rule. In the event a licensed facility ceases to have a licensed dealer in its employ, all operation involving regulated practices shall cease and written notification shall immediately be submitted to the board. In the event a licensed facility fails to have a licensed dealer in its employ within thirty (30) days of said notice, the facility license shall be summarily suspended until a licensed dealer is so employed.

Your original facility license will expire 12 months from the anniversary date of issue. A renewal notice will be sent approximately 6 weeks prior to the expiration date to the mailing address you provide. Failure to notify the Bureau in writing of any change of name or address may result in you not receiving renewal forms or other correspondence.

APPLICATION FEE (Individual or Facility)	\$ 30.00
ORIGINAL FACILITY LICENSE FEE (less than 10,000 gallon capacity)	\$ 50.00
ORIGINAL BULK FACILITY LICENSE FEE (more than 10,000 gallon capacity)	\$200.00

YOUR APPLICATION WILL BE CONSIDERED ONLY AFTER ALL REQUESTED INFORMATION HAS BEEN RECEIVED

Questions regarding this application or the requirements for licensure may be addressed to:

IDAHO LIQUEFIED PETROLEUM GAS SAFETY BOARD
BUREAU OF OCCUPATIONAL LICENSES
1109 Main Street, Suite 220
Boise, Idaho 83702-5642
E-mail – lpd@ibol.idaho.gov
Web site – www.ibol.idaho.gov/lpd.htm

**STATE OF IDAHO
IDAHO LIQUEFIED PETROLEUM GAS SAFETY BOARD
BUREAU OF OCCUPATIONAL LICENSES**

APPLICATION FOR LIQUEFIED PETROLEUM GAS (LPG) FACILITY LICENSE

I hereby make application for licensure in Idaho under the provisions of Title 54, Chapter 53, Idaho Code for an LPG Facility License.

1. Name of Facility _____

2. Owner Name(s) _____

(If more than one person shares ownership, attach a separate sheet containing the name & address of each principal, member, partner, shareholder, or any other person claiming ownership interest in the facility.)

3. Business Address _____

(This is your Address of Record and is public record) Street City State Zip

4. Mailing Address _____

(This address is not public record) Street/PO Box City State Zip

5. Federal Tax I.D. No. _____ **Total capacity (in gallons) of the facility named:** _____

6. Business phone _____ **E-mail** _____

7. Are you a citizen of the United States? ☐ Yes ☐ No

(If No, you must provide documentation confirming that you may lawfully reside and do business in the United States.)

8. Have you or any other person referenced by this application ever held a license for an LPG facility in any jurisdiction (any city, county, state or federal entity)? ☐ Yes ☐ No

(If Yes, list the jurisdictions & license numbers.)

9. Have you or any other person referenced by this application ever had an LPG license or registration revoked, suspended or otherwise sanctioned in any state within the past 5 years? ☐ Yes ☐ No

(If Yes, a copy of the charges and final order must be received by the Board directly from each issuing authority.)

10. The facility named above must meet the requirements of the Idaho laws and rules and the NFPA 58 code. By signing & submitting this application you are confirming said compliance.

11. You must attach a description of the type of structures and equipment to be used in the operation of the facility. You may be asked by the board to provide further information to ensure safe facility operation .

12. Each facility must employ at least 1 Idaho licensed dealer who is an Idaho resident & responsible for facility operation.

Print licensed dealer name & license number

AFFIDAVIT

I hereby certify under penalty of perjury that the information provided above is true and accurate to the best of my knowledge and belief. I further certify that I have reviewed and will comply with the Idaho Laws and Rules governing LPG facilities. I understand that said facility may be inspected by the Board or its agents at any time without notice, and that failure to allow such inspections is grounds for discipline. I also hereby authorize and direct any person, agency, firm, or other entity to release, upon the request of the Bureau of Occupational Licenses or its authorized representative, any information, report, record, statement, recommendation, or evidence that may have bearing on my eligibility for or maintenance of the license for which I am applying. I also hereby authorize the Bureau to release the information provided on this application about me that may otherwise be protected or confidential to other governmental agencies upon request.

Print Facility's Authorized Agent Name

Signature of Facility's Authorized Agent & SS#

State of _____, County of _____, ss

Subscribed and sworn before me this _____ day of _____, 20 ____

(seal)

Notary Public official signature
my commission expires _____